### SUMMARY TABLE OF MEASURES, PRODUCT LINES AND CHANGES

<table>
<thead>
<tr>
<th>HEDIS 2017 Measures</th>
<th>Applicable to:</th>
<th></th>
<th>Changes to HEDIS 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Guidelines for Data Collection and Reporting</td>
<td>Commercial</td>
<td>Medicaid</td>
<td>• Updated deadlines in General Guideline 9.</td>
</tr>
<tr>
<td></td>
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<td>Medicare</td>
<td>• Clarified in <em>General Guidelines</em> 17 and 18 that members with dual commercial and Medicaid coverage should only be reported in the commercial HEDIS reports.</td>
</tr>
<tr>
<td></td>
<td>✓</td>
<td>✓</td>
<td>• Added <em>General Guideline</em> 20; renumbered subsequent guidelines.</td>
</tr>
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<td>• Clarified General Guideline 23 (combined former <em>General Guidelines</em> 22 and 23).</td>
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<td></td>
<td>• Updated the &quot;plan-lock&quot; deadline in <em>General Guideline</em> 30.</td>
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<td>• Added the Electronic Clinical Data Systems (ECDS) data collection method to <em>General Guideline</em> 33.</td>
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<td></td>
<td>• Clarified in the Note in <em>General Guideline</em> 33 that if any data found in a supplemental data source are considered a supplemental data hit.</td>
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<td></td>
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<td></td>
<td>• Clarified requirements for <em>General Guideline</em> 34.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Replaced the Human Papillomavirus Vaccine for Female Adolescents measure with the Immunizations for Adolescents measures in <em>General Guideline</em> 39.</td>
</tr>
<tr>
<td></td>
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<td></td>
<td>• Added requirement for the Independent Laboratory Value Set in <em>General Guideline</em> 41.</td>
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<td>• Added <em>General Guideline</em> 43.</td>
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<td>• Added <em>General Guideline</em> 43.</td>
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<td></td>
<td></td>
<td></td>
<td>• Added CVX—Vaccines Administered to <em>General Guideline</em> 44 (formerly <em>General Guideline</em> 43).</td>
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<td>• Added <em>General Guideline</em> 46.</td>
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<tr>
<td>Guidelines for Calculations and Sampling</td>
<td>✓</td>
<td>✓</td>
<td>• Deleted the Human Papillomavirus Vaccine for Female Adolescents measure from the membership-dependent denominators in the Guidelines for the Hybrid Method.</td>
</tr>
<tr>
<td></td>
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<td>✓</td>
<td>• Deleted the Human Papillomavirus Vaccine for Female Adolescents measure from Table 1: Sample Size Information for Hybrid Measures.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>✓</td>
<td>• Revised Table 1 to indicate that prior year rates may not be used to reduce the sample for the <em>Immunizations for Adolescents</em> measure.</td>
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<tr>
<td>Guidelines for Effectiveness of Care</td>
<td>✓</td>
<td>✓</td>
<td>• No changes to this measure.</td>
</tr>
<tr>
<td>Adult BMI Assessment</td>
<td>✓</td>
<td>✓</td>
<td>• Included examples of services specific to the assessment or treatment of an acute or chronic condition that do not count toward the &quot;Counseling for nutrition&quot; and &quot;Counseling for physical activity&quot; indicators.</td>
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<tr>
<td>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/ Adolescents</td>
<td>✓</td>
<td>✓</td>
<td>• Replaced “Each of the 3 rates” with “✓” for the “Measurement year” row in Table WCC-1/2.</td>
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<td>HEDIS 2017 Measures</td>
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<td>Medicaid</td>
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<tr>
<td><strong>EFFECTIVENESS OF CARE</strong></td>
<td></td>
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</tbody>
</table>
| Childhood Immunization Status | ✓ | ✓ | • Added CVX codes to the measure.  
• Added HIV Type 2 Value Set to the optional exclusions.  
• Added optional exclusions for the rotavirus vaccine. |
| Immunizations for Adolescents | ✓ | ✓ | • Added the HPV vaccine.  
• Added Combination 2 (meningococcal, Tdap, HPV).  
• Removed the tetanus, diphtheria toxoids (Td) and meningococcal polysaccharide vaccines.  
• Added CVX codes to the measure. |
| Lead Screening in Children | | ✓ | • No changes to this measure. |
| Breast Cancer Screening | ✓ | ✓ | ✓ | • Clarified that diagnostic screenings are not included in the measure. |
| Cervical Cancer Screening | ✓ | ✓ | • Clarified that reflex testing does not meet criteria in step 2 of the hybrid specification. |
| Colorectal Cancer Screening | ✓ | ✓ | • Clarified when pathology reports may be used for the numerator. |
| Chlamydia Screening in Women | ✓ | ✓ | • No changes to this measure. |
| Care for Older Adults | ✓ | ✓ | ✓ | • Added the Medicare-Medicaid (MMP) product line.  
• Clarified in advance care plan examples that medical power of attorney is an advance directive.  
• Clarified examples of an advance care planning discussion.  
• Replaced “Each of the 4 rates” with a “✓” for the “Measurement year” row in Table COA-3. |
| Appropriate Testing for Children With Pharyngitis | ✓ | ✓ | • Added instructions to identify ED visits and observation visits that result in an inpatient stay. |
| Use of Spirometry Testing in the Assessment and Diagnosis of COPD | ✓ | ✓ | ✓ | • Clarified the allowable gap criteria for Medicaid beneficiaries whose enrollment is verified monthly.  
• Clarified that the first admission date should be used (if the admission is followed by a direct transfer) when determining the negative diagnosis history in step 2.  
• Added instructions to identify ED visits and observation visits that result in an inpatient stay. |
| Pharmacotherapy Management of COPD Exacerbation | ✓ | ✓ | ✓ | • Added instructions to identify ED visits that result in an inpatient stay (step 1).  
• Deleted the direct transfer exclusion and added a requirement to use the discharge date from the last admission (step 3).  
• Added instructions to identify direct transfers (step 3).  
• Deleted the exclusion of Episode Dates when there was a readmission or an ED visits within 14 days (formerly step 4). |
### Summary Table of Measures, Product Lines and Changes

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<tr>
<th>HEDIS 2017 Measures</th>
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<tr>
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<tr>
<td>Medication Management for People With Asthma</td>
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<td>Asthma Medication Ratio</td>
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<tr>
<td>Controlling High Blood Pressure</td>
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<td>Persistence of Beta-Blocker Treatment After a Heart Attack</td>
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<td>Statin Therapy for Patients With Cardiovascular Disease</td>
<td>✓</td>
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<tr>
<td>Comprehensive Diabetes Care</td>
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<tr>
<td>Statin Therapy for Patients With Diabetes</td>
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<td>Disease-Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis</td>
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<td>Osteoporosis Management in Women Who Had a Fracture</td>
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<td>Antidepressant Medication Management</td>
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<td>Follow-Up Care for Children Prescribed ADHD Medication</td>
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<tr>
<td>Follow-Up After Emergency Department Visit for Mental Illness</td>
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<tr>
<td>Follow-Up After Emergency Department Visit for Alcohol and Other Drug Dependence</td>
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<tr>
<td>Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications</td>
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<td>Diabetes Monitoring for People With Diabetes and Schizophrenia</td>
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<tr>
<td>Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia</td>
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<tr>
<td>Adherence to Antipsychotic Medications for Individuals With Schizophrenia</td>
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<tr>
<td>Metabolic Monitoring for Children and Adolescents on Antipsychotics</td>
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<tr>
<td>Annual Monitoring for Patients on Persistent Medications</td>
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<tr>
<td>Medication Reconciliation Post-Discharge</td>
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<td>HEDIS 2017 Measures</td>
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<td>--------------------------------------------------------------</td>
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</tr>
<tr>
<td>Non-Recommended Cervical Cancer Screening in Adolescent Females</td>
<td>• Added HIV Type 2 Value Set to the required exclusions.</td>
<td></td>
</tr>
<tr>
<td>Non-Recommended PSA-Based Screening in Older Men</td>
<td>• No changes to this measure.</td>
<td></td>
</tr>
</tbody>
</table>
| Appropriate Treatment for Children With Upper Respiratory Infection | • Added instructions to identify ED visits and observation visits that result in an inpatient stay.  
• Added a requirement to not include denied claims in the numerator. |
| Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis | • Revised the allowable gap and anchor date criteria.  
• Added two value sets to step 3 of the event/diagnosis criteria (HIV Type 2 Value Set; Disorders of the Immune System Value Set).  
• Added a requirement to not include denied claims in the numerator. |
| Use of Imaging Studies for Low Back Pain                      | • Replaced the Low Back Pain Value Set with the Uncomplicated Low Back Pain Value Set in step 1 of the event/diagnosis.  
• Added instructions to identify ED visits and observation visits that result in an inpatient stay.  
• Renamed the Osteopathic Manipulative Treatment Value Set to Osteopathic and Chiropractic Manipulative Treatment Value Set in step 1 of the event/diagnosis.  
• Added the Physical Therapy Value Set to step 1 of the event/diagnosis.  
• Added the Telehealth Value Set to step 1 of the event/diagnosis.  
• Replaced the Low Back Pain Value Set with the Uncomplicated Low Back Pain Value Set in step 2 of the event/diagnosis.  
• Revised the look back period to exclude members with recent trauma from 12-months to 3-months in step 4 of the event/diagnosis.  
• Added required exclusions and the following value sets: HIV Value Set, Spinal Infection Value Set, Organ Transplant Other Than Kidney Value Set, Kidney Transplant Value Set to step 4 of the event/diagnosis.  
• Added a required exclusion for prolonged use of corticosteroids to step 4 of the event/diagnosis.  
• Replaced the Low Back Pain Value Set with the Uncomplicated Low Back Pain Value Set in the numerator.  
• Added a requirement to not include denied claims in the numerator. |
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>Use of Multiple Concurrent Antipsychotics in Children and Adolescents</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td>• Added Cariprazine to the description of “Second generation antipsychotic medications” in Table APC-A. • Added a requirement to not include denied claims in the numerator. • Added a Note. • Removed “Numerator events by supplemental data” from Table APC-1/2.</td>
</tr>
<tr>
<td>Potentially Harmful Drug-Disease Interactions in the Elderly</td>
<td>✓</td>
<td></td>
<td></td>
<td>• Updated the medications included in the measure to align with the 2015 American Geriatrics Society Beers Criteria. • Removed delirium codes from the Psychosis Value Set. • Added a requirement to not include denied claims in the numerator for all rates.</td>
</tr>
<tr>
<td>Use of High-Risk Medications in the Elderly</td>
<td>✓</td>
<td></td>
<td></td>
<td>• Updated the medications included in the measure to align with the 2015 American Geriatrics Society Beers Criteria. • Revised numerators 1 and 2 for high-risk medications with days supply criteria (Table DAE-B) and with average daily dose criteria (Table DAE-C). • Revised numerator 2 to identify multiple dispensing events for the same high-risk medication. • Added a requirement to not include denied claims in numerators 1 and 2.</td>
</tr>
<tr>
<td>Medicare Health Outcomes Survey</td>
<td>✓</td>
<td></td>
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<td>• This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in HEDIS 2017, Volume 6: Specifications for the Medicare Health Outcomes Survey.</td>
</tr>
<tr>
<td>Fall Risk Management</td>
<td>✓</td>
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<td>• This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in HEDIS 2017, Volume 6: Specifications for the Medicare Health Outcomes Survey.</td>
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<td>Management of Urinary Incontinence in Older Adults</td>
<td>✓</td>
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<td>• This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in HEDIS 2017, Volume 6: Specifications for the Medicare Health Outcomes Survey.</td>
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<td>Osteoporosis Testing in Older Women</td>
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<td>• This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in HEDIS 2017, Volume 6: Specifications for the Medicare Health Outcomes Survey.</td>
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<tr>
<td>Physical Activity in Older Adults</td>
<td>✓</td>
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<td>• This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in HEDIS 2017, Volume 6: Specifications for the Medicare Health Outcomes Survey.</td>
</tr>
<tr>
<td>Aspirin Use and Discussion</td>
<td>✓</td>
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<td>✓</td>
<td>• This measure is collected using survey methodology. Detailed specifications and summary of changes are contained in HEDIS 2017, Volume 3: Specifications for Survey Measures.</td>
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### Summary Table of Measures, Product Lines and Changes

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<tr>
<td>Flu Vaccinations for Adults Ages 18-64</td>
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<tr>
<td>Flu Vaccinations for Adults Ages 65 and Older</td>
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<tr>
<td>Medical Assistance With Smoking and Tobacco Use Cessation</td>
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<td>Pneumococcal Vaccination Status for Older Adults</td>
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#### ACCESS/AVAILABILITY OF CARE

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<tr>
<td>Adults’ Access to Preventive/ Ambulatory Health Services</td>
<td>✓</td>
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<tr>
<td>Children’s and Adolescents’ Access to Primary Care Practitioners</td>
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<tr>
<td>Annual Dental Visit</td>
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</tbody>
</table>
| Initiation and Engagement of Alcohol and Other Drug Dependence Treatment | ✓          | ✓        | ✓        | • Added instructions to identify direct transfers.  
|                                                           |                |          |          | • Added instructions to identify ED visits that result in an inpatient stay.  
|                                                           |                |          |          | • Clarified that an AOD diagnosis is not required for direct transfers when identifying the IESD. |
| Prenatal and Postpartum Care                             | ✓          |          | ✓        | • Clarified that the prenatal visit for the Timeliness of Prenatal Care numerator can occur on the date of enrollment.  
|                                                           |                |          |          | • Clarified in the Note that the EDD must be on or between November 6 of the year prior to the measurement year and November 5 of the measurement year.  
|                                                           |                |          |          | • Added a Note explaining that the organization may use EDD to identify the first trimester for the Timeliness of Prenatal Care rate and use the date of delivery for the Postpartum Care rate.  
<p>|                                                           |                |          |          | • Replaced “Each of the 2 rates” with a “✓” for the “Measurement year” row in Table PPC-1/2. |
| Call Answer Timeliness                                   | ✓          | ✓        | ✓        | • No changes to this measure. |</p>
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<td><strong>EXPERIENCE OF CARE</strong></td>
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<td>Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics</td>
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<td>✓</td>
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<td>CAHPS Health Plan Survey 5.0H, Adult Version</td>
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<td>CAHPS Health Plan Survey 5.0H, Child Version</td>
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<td>Children With Chronic Conditions</td>
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<td><strong>UTILIZATION AND RISK ADJUSTED UTILIZATION</strong></td>
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</table>
| Guidelines for Utilization Measures | ✓ | ✓ | ✓ | • “Guidelines for Utilization and Risk Adjusted Utilization Measures” have been renamed, “Guidelines for Utilization Measures.”  
• Clarified in General Guideline 6 that all inpatient stays must be considered, regardless of payment status, when identifying ED visits that do not result in an inpatient stay. |
| Frequency of Ongoing Prenatal Care | | ✓ | | • Clarified the example calculation in step 2. |
| Well-Child Visits in the First 15 Months of Life | ✓ | ✓ | | • Clarified that services specific to the assessment or treatment of an acute or chronic condition do not count toward the measure. |
| Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life | ✓ | ✓ | | • Clarified that services specific to the assessment or treatment of an acute or chronic condition do not count toward the measure. |
| Adolescent Well-Care Visits | ✓ | ✓ | | • Clarified that services specific to the assessment or treatment of an acute or chronic condition do not count toward the measure. |
| Frequency of Selected Procedures | ✓ | ✓ | ✓ | • No changes to this measure. |
| Ambulatory Care | ✓ | ✓ | ✓ | • Added instructions to identify ED visits that result in an inpatient stay. |
| Inpatient Utilization—General Hospital/Acute Care | ✓ | ✓ | ✓ | • No changes to this measure. |
| Identification of Alcohol and Other Drug Services | ✓ | ✓ | ✓ | • Deleted instructions to use place of service or location of service codes to exclude services known to be inpatient.  
• Added instructions to identify ED and observation visits that result in an inpatient stay. |
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<td>Antibiotic Utilization</td>
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<td>Standardized Healthcare-Associated Infection Ratio</td>
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<td>Guidelines for Risk Adjusted Utilization Measures</td>
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<td>Inpatient Hospital Utilization</td>
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<td>Hospitalization for Potentially Preventable Complications</td>
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### Changes to HEDIS 2017

- **Mental Health Utilization**
  - Added instructions to identify ED and observation visits that result in an inpatient stay.

- **Antibiotic Utilization**
  - No changes to this measure.

- **Standardized Healthcare-Associated Infection Ratio**
  - First-year measure.

- **Guidelines for Risk Adjusted Utilization Measures**
  - New section added for HEDIS 2017.

- **Plan All-Cause Readmissions**
  - Moved the Risk Adjustment Determination section to the Guidelines for Risk Adjusted Utilization Measures.
  - Clarified that organizations may not consolidate stays into a single stay if the discharge date from the first setting and the admission date of the second setting are two or more calendar days apart.
  - Added instructions to identify direct transfers.
  - Changed the reference of “discharges” to “admissions” in step 3 of the Numerator.

- **Inpatient Hospital Utilization**
  - Revised the instructions for calculating observed events.
  - Moved the Risk Adjustment Determination section to the Guidelines for Risk Adjusted Utilization Measures.
  - Clarified that the final Expected counts must be rounded to four decimal places using the .5 rule and no rounding should occur before this step.
  - Added Expected Discharges/1,000 Members as a data element to Table IHU-B-2/3, Table IHU-C-2/3 and Table IHU-D-2/3.

- **Emergency Department Utilization**
  - Added instructions to identify ED visits that result in an inpatient stay when identifying observed events.
  - Moved the Risk Adjustment Determination section to the Guidelines for Risk Adjusted Utilization Measures.
  - Clarified that the final Expected counts must be rounded to four decimal places using the .5 rule and no rounding should occur before this step.
  - Added Expected ED Visits/1,000 Members as a data element to Table EDU-B-2/3.

- **Hospitalization for Potentially Preventable Complications**
  - Added instructions to identify direct transfers when identifying observed events.
  - Moved the Risk Adjustment Determination section to the Guidelines for Risk Adjusted Utilization Measures.
  - Clarified that the final Expected counts must be rounded to four decimal places using the .5 rule and no rounding should occur before this step.
  - Added Expected Chronic/Acute/Total ACSC Discharges/1,000 Members as a data element to Table HPC-B-3, Table HPC-C-3 and Table HPC-D-3.
## Summary Table of Measures, Product Lines and Changes

<table>
<thead>
<tr>
<th>HEDIS 2017 Measures</th>
<th>Applicable to:</th>
<th>Changes to HEDIS 2017</th>
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| Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults | ✔️ | ✔️ | ✔️ | • Revised specification layout to align with new ECDS measure layout.  
• Simplified steps to calculate the Initial Population.  
• Revised the data collection platform to require the use of XML. |
| Depression Remission or Response for Adolescents and Adults | ✔️ | ✔️ | ✔️ | • First-year measure. |